


**DEPARTMENT OF HUMAN RESOURCES
SOCIAL SERVICES ADMINISTRATION
311 W. SARATOGA STREET
BALTIMORE, MARYLAND 21201**

DATE: August 15, 2015

POLICY #: SSA – CW # 16-11

TO: Directors, Local Departments of Social Services
Assistant Directors, Services

FROM: Drew McKone, Chief of Staff 
Office of the Secretary

RE: Disability Benefits Advocacy Program

PROGRAMS AFFECTED: Out-of-Home Placement Services

ORIGINATING OFFICE: Out of Home Placement Services

ACTION REQUIRED OF: All Local Departments

REQUIRED ACTION: Implementation of Policy

ACTION DUE DATE: August 31, 2015

CONTACT PERSON: Steven Youngblood
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PURPOSE:

The purpose of this policy is to provide guidance to the local departments of social services as to the implementation of the Disability Benefits Advocacy Project.

BACKGROUND:

As part of the Title IV-E eligibility process, local departments of social services (LDSS) routinely screen, file applications and become the representative payees for social security benefits (Title II & Title XVI) on behalf of children in their care. The benefits are then used to offset the cost of foster care, funds in excess of the cost of care are deposited into trust fund bank accounts and may only be used for certain expenses related to the child's disability.

In August 2012, DHR procured the services of a consultant to assess and offer recommendations to improve the State's ability to identify and collect Title II and Title XVI benefits on behalf of eligible children in foster care. The report indicated that with improved practices the State could increase the amount of federal revenue that could be used to support the health, welfare and safety of its foster care population. Based on the results of the report DHR has contracted with a Vendor that will be responsible for meeting the goal of the timely acquisition of Social Security Title II and Title XVI benefits for children in foster care that are in the legal custody of the LDSS.

DEFINITIONS:

Supplemental Security Income otherwise known as SSI falls under **Title XVI** of the Social Security Act. SSI provides disability benefits to individuals who have never worked, or whose work history has not earned them the credits needed to qualify for Social Security Disability Insurance (SSDI). Eligible individuals are deemed to be physically and/or mentally disabled.

Old Age, Survivors' and Disability Insurance otherwise known as OASDI falls under **Title II** of the Social Security Act. OASDI is a comprehensive federal benefits program that provides monthly benefits intended to replace, in part, the loss of income as a result of retirement, disability or death. Children can be eligible for Survivors benefits as a result of a deceased parent or Disability Insurance from an eligible parent's Social Security record.

ACTION:

The Vendor will be responsible for managing the benefit application, acquisition, and adjustment process for all children in the custody of the LDSS. The core functions include the following:

- Screening potentially eligible children for Title II and Title XVI benefits;
- Complete and file Social Security applications;

- Completing documentation from Social Security to ensure ongoing eligibility (Continue Disability Reviews and Non-Medical Reviews);
- Transitioning children from childhood to adult SSI;
- Executing payee changes;
- Notifying Social Security Administration (SSA) of placement changes when necessary; and
- Completing the DHR/SSA 224 Notification to Child's Counsel for Title II and Title XVI Benefits.

In order to perform the above functions the Vendor will receive a monthly list of children. The list will identify children that have been identified as "potentially eligible" for Title II and Title XVI Benefits (disabled and/or have been identified as having a deceased or disabled parent), children that have recently entered Out-of-Home Placement (removal date plus 60 days), children that have received Title II or Title XVI benefits in the past 6 months, along with Placement Structure type.

On a monthly basis the Vendor will submit statistical reports to DHR broken down by jurisdiction detailing what referrals, applications and tasks they have completed. The reports will be provided to each LDSS.

In the case of children who exit foster care and the case is closed with a pending Social Security Benefit application, the Vendor will stop working on the case upon receiving notification from the monthly list and/or the LDSS that the child's foster care case has closed. The Vendor shall notify the LDSS responsible for the foster youth as to where they are in the application process. This shall be done regardless of where the Vendor is in the application process. The Vendor shall return all case-related documentation to the LDSS responsible for the foster child no later than seven (7) calendar days after receiving notification of the child's foster care exit. The LDSS should assist the family by updating them on the status of the pending application, and assist them by providing them with documentation if they wish to continue with the application process.

TITLE XVI BENEFITS (SUPPLEMENTAL SECURITY INCOME (SSI))

I. Identifying Potentially Eligible Children

- a. The LDSS will be responsible for "flagging" potentially eligible children in MD CHESSIE. This will be done by completing the Disability Section in MD CHESSIE for the youth that are identified to be "potentially eligible".
- b. The Caseworker is responsible for completing the Disabilities Tab, under the Functioning Section in the Service Case.

Training - Functioning - Service Cases (#20001097)

Service Cases > Abrams, Abby (#20001097) > Clients > Abrams, Abby (#20004928) > Functioning

Characteristics

Permanently Disabled	Disability Type	Disability Condition	Disability Start Date	Disability End Date
<input type="checkbox"/>			00/00/0000	00/00/0000

Disability Detail

☐ Permanently Disabled

*Disability Type: *Disability Condition:

Diagnosed Disability:

Disability Start Date: Disability End Date:

Evaluation Date: Evaluator/Clinician Name:

Comments: [Edit](#)

Last connection: CHSS-TRA-04 TRA_01_Master IN0752C 07traw 06/29/2015 02:42 pm

Start 2:43 PM 6/29/2015

c. The following fields need to be completed:

1. Disability Type - Other Disability.
2. Disability Condition - Yes.
3. Diagnosed Disability - Identify the disability that you believe makes your child “potentially eligible” for SSI.
4. Disability Start Date - The date you are completing the Disabilities Section.
5. Evaluation Date - The date you are completing the Disabilities Section.
6. Evaluator/Clinician Name - Enter “PE-SSI”. This means “potentially eligible” for SSI benefits.
7. Comment Section - Enter what you believe makes the child “potentially eligible”. Enter “Apply for SSI Benefits”.

Permanently Disabled	Disability Type	Disability Condition	Disability Start Date	Disability End Date
<input type="checkbox"/>	Other Disability	Yes	06/01/2015	00/00/0000

Disability Detail

☐ Permanently Disabled

*Disability Type: Other Disability *Disability Condition: Yes

Diagnosed Disability: Down Syndrome

Disability Start Date: 06/01/2015 Disability End Date: 00/00/0000

Evaluation Date: 06/01/2015 Evaluator/Clinician Name: PE-SSI

Comments: Child has been diagnosed with Down Syndrome. Apply for SSI Benefits.

- d. Please note, if you are identifying that a child is “potentially eligible” for SSI benefits, you should also be completing the other Disability Types that apply to the child you are identifying. For example, if the child is blind, this should be identified under the “Visual Disability”. It is very important that all the disability fields are completed, as this will impact the AFCARS data.

II. Application Process

- a. If the Vendor determines that an application should be filed, The LDSS will be contacted by the Vendor to schedule an appointment to come to the LDSS and acquire the necessary documents to support the application. The LDSS should make the case file available for review.
- b. The Vendor will be scanning the documents to support the application. It is the LDSS responsibility to have the documents associated with the disability that has been identified to make the child “potentially eligible” for SSI benefits available. Examples of evidence needed to support the application includes the following:
 1. Medical reports and or test results signed by a licensed Physician, psychologist, optometrist or audiologist;
 2. Hospital, clinical records and or social work progress reports;
 3. Psychological evaluations and or psychometric testing reports;
 4. School records, IEP, report cards, cumulative academic record, day care reports;

5. Psychological/psychiatric therapy treatment and/or progress notes; or
 6. Documentation related to work activity
- c. If necessary, the Vendor will inform the child's LDSS caseworker in the event the child needs a consultative medical exam to complete the social security application. This determination is made by Maryland Disability Determination Services. The letter will be prepared by MDDS, and mailed to the Vendor. The caseworker will be supplied with a copy of the letter by the Vendor. A copy of the letter will be given to the child's caseworker. The letter will include the date and time of the appointment, and where to take the child. It is the responsibility of the caseworker to get the child to the medical appointment, or make arrangements to get the child to the medical appointment. After the exam is completed, the doctor completing the medical exam will forward the report to Maryland Disability Determination Services.
 - d. The Vendor is responsible for completing and submitting all initial applications and documentation to the Social Security Administration (SSA) on behalf of the child. If necessary, the Vendor will review and discuss pending applications in the local SSA Disability Determination offices.
 - e. When making application for SSI benefits for a child 12 years and older, the child must sign the SSA 827 form. This is the "Authorization to Disclose information to the Social Security Administration." The Vendor will notify the child's caseworker when there are forms needing the child's signature. The forms will be provided to the child's caseworker by the Vendor. The forms will be signed by the child and returned to the Vendor no later than fourteen (14) business days after they are given to the child's caseworker.
 - f. It is necessary for the LDSS Director, or Designee, to sign the SSI application once it is completed by the Vendor. Arrangements should be made between the Vendor and the LDSS to get the application signed.
 - g. The Vendor is responsible for completing *DHR/SSA 224-Notification To Child's Counsel for Title II and Title XVI Benefits*. Please refer to Policy **SSA-CW # 16-7 (replaces SSA-CW # 15-1)**, for specifics regarding the completion of DHR/SSA 224.
 - h. Upon determination of the benefits, the Vendor will notify the LDSS. The Vendor will review all denied cases, and will pursue all appropriate reconsiderations and appeals (excluding federal court appeals) including preparing and filing required information and presenting materials to the Social Security Administration no later than 30 calendar days from the date of the denial decision, or within the timeframe required by law, whichever period is shorter.

III. Transitioning youth and SSI benefits:

The Vendor will be responsible for identifying youth that are transitioning from childhood to Adult SSI. The Vendor will complete and submit the applications and supporting documentation to the Social Security Administration in order to facilitate childhood to adult benefit conversions. The LDSS will work collaboratively with the Vendor in order to provide supporting documentation. This conversion will be completed for foster children that are receiving Title II Benefits (SSI) who have their own documented disability and have turned 18 years old.

TITLE II BENEFITS (OLD AGE, SURVIVORS, DISABILITY INSURANCE (OASDI))

I. Identifying Potentially Eligible Children with a Deceased Parent or Disability Insurance from an Eligible Parent's Social Security Record

- a. If the child's parent(s) is/are deceased, an application for Survivors Benefits should be filed on behalf of the child.
- b. Caseworkers are responsible for making sure that the parent has been entered as a client in the Service Case, and that the parent has a Program Assignment of Parent/Guardian of a child in Out of Home.
- c. Caseworkers are responsible for entering the Date of Death (DOD) for the parent in MD CHESSIE.
- d. LDSS must acquire the Death Certificate for the deceased parent.
- e. If the Vendor determines that an application should be filed, the LDSS will be contacted by the Vendor to schedule an appointment to come to the LDSS and acquire the necessary documents to support the application. The LDSS should make the case file available for review. The Vendor will be scanning the documents to support the application.
- f. It is necessary for the LDSS Director, or Designee, to sign the application for Survivors Benefits once it is completed by the Vendor. Arrangements should be made between the Vendor and the LDSS to get the application signed.
- g. If the LDSS is aware that a child's parent(s) are receiving **Disability Insurance** from the Social Security Administration, a referral must be made by the caseworker, initiating the application process. For the purposes of monitoring, the referral must be sent to the Social Services Administration, and will then be forwarded to the Contract Manager at DHR. This referral will

then be forwarded to the Vendor. This process is necessary for monitoring purposes. Please see attached referral- Appendix A.

General Information regarding SSA benefits and children in foster care:

Where a child is placed affects their benefits. In order to keep the Vendor up to date on placement changes for children in care that are receiving SSI benefits, a monthly report will be pulled from MD CHESSIE, and sent to the Vendor. Please keep in mind it is good practice to have a working relationship with the Vendor. Notifying the Vendor that a child has moved to another placement is encouraged, and will be beneficial when having to update the Social Security Administration.

If a child is placed in a Formal Kinship placement or a Trial Home Visit with the parent/guardian and is a recipient of Social Security benefits, and remains in the care and custody of the LDSS, it is the responsibility of the Formal Kinship provider or the Parent/Guardian to apply to be the Representative Payee on behalf of the child. The LDSS should **not** remain the Representative Payee for the benefit. The Vendor will notify the Social Security Administration that the child has moved. The LDSS should assist the Formal Kinship Provider or the Parent/Guardian by providing a letter to the family that can be taken to the Social Security Administration when they apply to be the Representative Payee.

There may be children currently in foster care that were previously deemed SSI eligible by the Social Security Administration. At that time, the LDSS and the IV-E specialist opted for the Title IV-E funding, instead of receiving the SSI benefits on behalf of these children. Effective July 1, 2015, under the Title IV-E Waiver, the State will now be permitted to accept both SSI benefits and IV-E funding for these children. These cases will need to be reviewed by the LDSS. If the child has not received SSI benefits in over 1 year, the Vendor will need to re-apply for SSI benefits for the child. If the child has not received SSI benefits in less than 12 months, the Vendor will need to apply on behalf of the LDSS to be the Representative Payee for the SSI benefit.

Referral for Social Security Benefits

Date of Referral: _____

Name of Child's Caseworker: _____

Name of LDSS: _____

Caseworker's Telephone Number: _____

Type of benefit child in foster care is potentially eligible to receive:

_____ Old Age (Title II)

_____ Survivors (Title II)

_____ Disability Insurance-SSDI (Title II)

_____ Supplemental Security Income (Title XVI)

Full Name of Child: _____

Child's Date of Birth: _____

Child's Social Security Number: _____

Child's Current Placement (include name of placement and address): _____

Is this a Medicaid paid Placement? _____yes _____no

Mother's Full Name: _____

Mother's Date of Birth: _____

Mother's Social Security Number: _____

Mother's Last Known Address: _____

Date of Death (if applicable) _____

Father's Full Name: _____

Father's Date of Birth: _____

Father's Social Security Number: _____

Father's Last Known Address: _____

Date of Death (if applicable) _____